24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)	
	C C00553560
Check if 24-hour report 48-hour report New report Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
FORTH RIGHT STRATEGY INC	10 14 2016
Mailing Address 1155 - 15TH STREET NW	
SUITE 410	Amount
City State Zip Code	5141.81
WASHINGTON DC 20005	Transaction ID : SE.56802 Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL Category/ Type 004	10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offi	ice Sought: House District: 00
CLINTON, HILLARY RODHAM, , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Dis 201	sbursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	7 L. L. L. L
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y Y
Type	
Name of Federal Candidate Support Off	fice Sought: House District:
Oppose	President Senate State:
Caloridar Tour To Bato	sbursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	5141.81
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) SOBTOTAL OF GIRLOTHIZEG HIGGESTAGES EXPONDITIONS	
(c) TOTAL Independent Expenditures	5141.81
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
MACKENZIE, SCOTT B, , , [Electronically Filed] Date	10 15 2016
Signature	